FORM D

116729

OMB APPROVAL

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FORM D

UNITED STATES

SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OXICE OF SALE OF SECURITIES PÚRSUANT TO REGULATION D, SECTION 4(6), AND/OR

SEC USE ONLY Prefix Serial DATE RECEIVED

UNIFORM LIMITED OFFERING EXEMPTION ( check if this is an amendment and name has changed, and indicate change.) Name of Offering

BECEIVED

Issuance and Sale of Series A-1 Preferred Stock		
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 5	06 Section 4(6) ULOE	
Type of Filing: New Filing   Amendment		
A. BASIC IDENTIFICATION D	ATA	
1. Enter the information requested about the issuer		03017166
Name of Issuer ( check if this is an amendment and name has changed, and in-	dicate change.) Kemia, Inc.	-0017100
Address of Executive Offices: (Number and Street, City, State, Zip Code) 9390 Towne Centre Drive, Suite 100, San Diego, CA 92121	Telephone Number (In (858) 964-1414	ncluding Area Code)
Address of Principal Business Operations: (Number and Street, City, State, Zip Code) (if different from Executive Offices) SAME		ncluding Area Code)
Brief Description of Business:		
Type of Business Organization	other (please specify):	
Actual or Estimated Date of Incorporation or Organization:    Month   Year		MAR 2 4 2003
GENERAL INSTRUCTIONS		FINANCIAL

## Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

#### A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; • Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. ☐ Promoter ☐ Executive Officer □ Director Check Box(es) that Apply: ☐ Beneficial Owner ☐ General and/or Managing Partner Full Name (Last name first, if individual) Anderson, Paul (Number and Street, City, State, Zip Code) **Business or Residence Address** c/o Kemia, Inc., 9390 Towne Centre Drive, Suite 100, San Diego, CA 92121 Check Box(es) that Apply: Promoter Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Cohen, Fred (Number and Street, City, State, Zip Code) Business or Residence Address c/o Texas Pacific Group, 301 Commerce Street, Suite 3300, Fort Worth, TX 76102 Beneficial Owner ☐ General and/or Check Box(es) that Apply: Promoter Executive Officer □ Director Managing Partner Full Name (Last name first, if individual) Fleming, Standish Business or Residence Address (Number and Street, City, State, Zip Code) c/o Forward Ventures, 9393 Towne Centre Drive, Suite 200, San Diego, CA 92121 Check Box(es) that Apply: Beneficial Owner ☐ Executive Officer □ Director Promoter General and/or Managing Partner Full Name (Last name first, if individual) Janney, Daniel Business or Residence Address (Number and Street, City, State, Zip Code) c/o Alta Partners, One Embarcadero Center, Suite 4040, San Francisco, CA 94111 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Roberts, Ed Business or Residence Address (Number and Street, City, State, Zip Code) c/o Kemia, Inc., 9390 Towne Centre Drive, Suite 100, San Diego, CA 92121 Check Box(es) that Apply: Beneficial Owner Director General and/or ☐ Promoter Managing Partner Full Name (Last name first, if individual) Walker, Maria Business or Residence Address (Number and Street, City, State, Zip Code) c/o Forward Ventures, 9393 Towne Centre Drive, Suite 200, San Diego, CA 92121 Beneficial Owner Check Box(es) that Apply: ☐ Promoter Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Bartfai, Tamas **Business or Residence Address** (Number and Street, City, State, Zip Code) c/o Kemia, Inc., 9390 Towne Centre Drive, Suite 100, San Diego, CA 92121

Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first,	if individual)								
Rebek, Julius									
Business or Residence Address (Number and Street, City, State, Zip Code)									
c/o Kemia, Inc., 9390 Town	ne Centre Drive	, Suite 100, San Diego	, CA 92121						
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner				
Full Name (Last name first,	if individual)	<del>-</del>							
Business or Residence Address (Number and Street, City, State, Zip Code)									
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner				
Full Name (Last name first, if individual)									
Business or Residence Address (Number and Street, City, State, Zip Code)									

B. INFORMATION ABOUT OFFERING													
									-	Yes No			
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									🗀 🖾				
										N/A			
2. What is the minimum investment that will be accepted from any individual?									***************************************	Yes No			
3. Doe	s the offer	ring permi	t joint ow	nership of	a single u	mit?							
<ol> <li>Does the offering permit joint ownership of a single unit?</li> <li>Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. NONE</li> </ol>													
			if individ		for that b	N/A	eater only.	NONE	<u> </u>				
run Na	ine (Last i	ianic mst,	ii iiidivid	uai)		11/7							
Rusines	s or Resid	lence Add	ress (Num	her and S	treet. City	State Zir	Code)		N/A				
Dusines	.5 01 110510		1000 (114111			, 2, 2.,	, 0000)		1 1/1 1				
Name o	f Associat	ted Broker	or Dealer			N/A						<del></del>	
States in	n Which F	erson Lis	ted Has Sc	licited or	Intends to	Solicit Pu	ırchasers	<del> </del>					
(Ch	eck "All S	States" or o	check indi	vidual Sta	tes)								All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Na	me (Last 1	name first,	if individ	ual)		N/A							
Busines	s or Resid	lence Add	ress (Num	ber and S	treet, City	, State, Zij	Code)						
Name o	f Associat	ted Broker	or Dealer										
												· -	
			ted Has So										
(Check "All States" or check individual States)									All States				
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	<del></del>

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \sum \) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	ge	
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$2,000,001	\$2,000,001
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	\$ <u></u>
	Partnership Interests	\$	\$
	Other (Specify)	S	\$
	Total	\$2,000,001	\$2,000,001
	Answer also in Appendix, Column 3, if filing under ULOE		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases of the total lines. Enter "0" if answer is "none" or "zero."	er te	
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	<u>6</u>	\$ <u>2,000,001</u>
	Non-accredited Investors		<u>\$0</u>
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for a securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12 months prior to the first sale of securities in this offering. Classify securities by type liste in Part C - Question 1.	2)	
	The second is	Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504N/A		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of in this offering. Excluded amounts relating solely to organization expenses of the information may be given as subject to future contingencies. If the amount of an expense, furnish an estimate and check the box to the left of the estimate.	e issuer. The	
	Transfer Agent's Fees		□ \$
	Printing and Engraving Costs		<b>S</b>
	Legal Fees		<b>∑</b> \$25,000
	Accounting Fees		<b>\$</b>
	Engineering Fees		□ s
	Sales Commissions (specify finders' fees separately)		<b>\$</b>
	Other Expenses (identify) Finders' fees		
	Total		<b>≥</b> \$25,000

	C. OFFERING PRICE, NUM	BER OF INVESTORS, EXPENSES AND U	SE OF PROCEED	S				
	b. Enter the difference between the aggregate off Question 1 and total expenses furnished in resp difference is the "adjusted gross proceeds to the issue."	onse to Part C - Question 4.a. This			<u>\$1,975,001</u>			
5.	Indicate below the amount of the adjusted gross pr be used for each of the purposes shown. If the furnish an estimate and check the box to the left of listed must equal the adjusted gross proceeds to th Question 4.b above.	amount for any purpose is not known, the estimate. The total of the payments						
			Payments to Officers, Directors, & Affiliates		Payments To Others			
	Salaries and fees		☐ \$		\$			
	Purchase of real estate		<b>\$</b>		\$			
	Purchase, rental or leasing and installation of n	nachinery and equipment	□ \$		\$			
	Construction or leasing of plant buildings and	facilities	<b>\$</b>		\$			
	Acquisition of other businesses (including the this offering that may be used in exchange for issuer pursuant to a merger)	the assets or securities of another	□ \$		\$			
	Repayment of indebtedness				\$			
	Working capital				\$1,975,001			
	Other (specify)				S			
	• •		□ \$	_				
			□ s		\$			
	Column Totals		s 0	$\square$	\$1,975,001			
			_					
Total Payments Listed (column totals added)								
D. FEDERAL SIGNATURE								
follow	ng signature constitutes an undertaking by the issue taff, the information furnished by the issuer to any ne	er to furnish to the U.S. Securities and Exchan	ge Commission, up					
Issuer	Print or Type)	Signature	Date					
Kemi		2 (war	March <u>19</u> , 2003	3				
Name	of Signer (Print or Type)	Title of Signer (Print or Type)						
	C. Walker	Secretary						

ATTENTION \_\_\_\_\_\_ Intentional misstatements or omissions of facts constitute federal criminal violations. (See 18 U.S.C. 1001.)